

Periscope.

CLINICAL NEUROLOGY.

101 HEILUNG ACUTER GEISTESSTÖRUNG NACH EXTIRPATION EINER HIRNGESCHWULST (Cure of Acute Mental Disturbance after Extirpation of a Brain Tumor). Bayerthal (Münchener medicinische Wochenschrift, 1899, No. 46, S. 1537).

A man of twenty-nine, having had in his eighteenth year cervical adenitis, but otherwise having been healthy, began early in 1897 to suffer from headache and vertigo. On April 1 he noticed a weakness in the left foot, and ten days later had an epileptiform attack, beginning with twitching in the toes of the left foot. Similar attacks recurred from time to time, and the patient's condition grew gradually worse.

At the time of coming under the author's care in December, 1897, there was paresis of the left leg and weakness of the left arm, with exaggerated reflexes in the leg. He also suffered from paresthesia in the left lower extremity, and had occasional attacks of precordial oppression. He was treated by bromide and iodide of potassium, until June, 1898, but with no improvement. At this time there appeared clonic contractions of the muscles of the left arm, which much distressed the patient. In September, 1898, he developed visual hallucinations with delusions of persecution, and began to threaten his surroundings. On account of the leg paralysis, of the signal symptom noticed at the beginning of the Jacksonian attacks, and of localized tenderness on percussion in the right parietal region near the middle line, a tumor situated in the right paracentral lobule was diagnosed, and an operation was decided upon. Under morphia-chloroform narcosis, a skin and bone flap was raised from over the upper end of the central convolutions, but the operation had to be interrupted, on account of threatened heart failure. Two days later it was completed under morphia alone, without difficulty, and apparently without pain to the patient. Upon opening the dura, the brain bulged slightly, and appeared entirely normal. Upon careful inspection, however, there was seen at a point very near the median line a slight injection of the pia, in the middle of which there were a few tiny nodules. Careful probing at this point disclosed the presence, at about $2\frac{1}{2}$ mm. beneath the surface, of a hard mass. A finger introduced was able to shell out a tumor, which arose from the median surface of the hemisphere, and sent a process about 2 cm. long, and 3 cm. thick, forward and outward. The bleeding was inconsiderable and was easily controlled. The tumor, which was about the size of a walnut, proved to be a solitary tubercle. The patient made a good recovery. His mental condition became normal at once; only on one occasion was there recurrence of hallucinations, and they were then very fleeting. There was some gain in power in the left leg, and the twitching in the left arm gradually disappeared.

Two months after the operation the patient was discharged from the hospital. Mentally he was quite normal, except for slight irritability. There was still left hemiparesis, the leg much more affected than the arm, being dragged somewhat in walking. There was paresthesia in the affected limb. One year after the operation, the patient still remained in good mental condition; there was some

increase in power on the paralyzed side, but the Jacksonian attacks had recurred, the patient having had four in spite of bromide treatment. These attacks always began in the left leg. ALLEN.

102 CASO DI TETANO TRAUMATICO CURATO COLL'ANTITOSSINA TIZZONI-GUARIGIONE. (A Case of Traumatic Tetanus Treated by Tizzoni's Antitoxin—Recovery). Virgilio Barachini. (*Gazz. degli Ospedali et delle Cliniche*, Jan. 7, 1900. No. 3, p. 20).

The author relates the case of a previously sound boy of thirteen years of age. Seventeen days before the onset of his nervous symptoms, he had, while playing barefooted with some companions, accidentally thrust the prong of a sharp pitch-fork into the sole of the right foot, producing a wound 2 cm. long and $2\frac{1}{2}$ deep. He made no attempt to cleanse the wound, and kept about his play during the entire day. Four days later Barachini was called to see him because the wounded foot, which had as yet received no medical treatment, had become red and swollen, and the boy feverish. B. carefully cleansed the wound and applied antiseptic dressings. Under this treatment suppuration ceased, the temperature dropped, and a complete cessation of all symptoms in a short time was confidently looked forward to. Within a week, however, the boy's parents noticed an unusual inappetence on his part and also that he had become restless and no longer cared for play.

On the evening of the 17th day after the accident, the boy, on attempting to withdraw from the supper table felt his entire right leg grow stiff, and immediately after his whole body was shaken by a convulsion so painful that he fell to the ground. In his fall he struck his head violently and remained unconscious for some time. On recovering his senses the pain was found to have disappeared, but the muscles of the trunk and lower extremities were so rigid that he had to be carried to bed. During the night he experienced general malaise and an intense pain which radiated from the injured foot over the entire right leg and invaded the left to a less degree; he also felt rigid all over, but particularly in the jaws, neck, back and lower extremities, the rigidity being most marked during an access of pain. To this was added a painful sense of constriction in the throat, with dysphagia. The next morning Barachini found the boy in bed and presenting the tetanic facies, with risus sardonicus well marked. Trismus was so pronounced that it was only with the greatest difficulty that the handle of a teaspoon could be introduced between the teeth, and efforts at swallowing even small quantities of liquid increased the spasm of the face and neck muscles. The wounded foot showed only a small dirty-gray suppurating area.

Barachini at once administered a subcutaneous injection, in the axillary region of the left chest, of 25 cm. of Tizzoni's anti-tetanic serum, equivalent to 2,500,000 immunizing units, and prescribed a small amount of bromide and chloral. During the night the patient slept somewhat and had only three or four convulsive seizures; he succeeded, also, in swallowing liquids fairly easily. The next day the trismus was increased, but temperature, pulse and respirations had fallen. A second injection of an equal amount of the serum was given on the opposite side of the chest, but without result, and in the evening 1 ctg. of morphine was injected. The following day there was noticeable amelioration of all symptoms, with a further drop in pulse and temperature. No further use of the serum was made, but the bromide and chloral were given by the mouth on two occasions, and the bowels were moved with calomel and syrup of buckthorn. Six days after the onset of the tetanic symptoms a